



TRANSMITTAL FORM

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First Named Inventor

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Art Unit

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Examiner Name

Olivia Marie Marsh

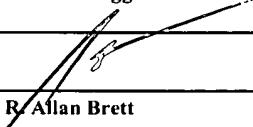
Attorney Docket Number

51085-5 /aba

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Request for Continued Examination
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Smart & Biggar		
Signature			
Printed name	R. Allan Brett		
Date	September 29, 2006	Reg. No.	40,476

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